

Amendments to the Claims

This listing of claims will replace all prior versions, and listings, of claims in the application:

Listing of Claims

1. (Currently amended) A method for treating an acute pain medication overuse disorder caused by overuse of acute pain medication, the method comprising a step of local-administration by intramuscular or subcutaneous administration to [[a]] locations on or within a head of a patient of between about 105 units and about 260 units of a pure botulinum type A or type B toxin, wherein the pure botulinum toxin has a molecular weight of about 150 kDa, to a patient with acute pain medication overuse disorder associated with overuse of acute pain medication, wherein the patient takes the medication prior to experiencing pain and experiences pain after the intake of acute pain medication, thereby treating the acute pain medication overuse disorder caused by the overuse of acute pain medication.
2. (Previously presented) The method of claim 1, wherein the botulinum toxin is a botulinum toxin type-B.
3. (Original) The method of claim 1, wherein the botulinum toxin is a botulinum toxin type A.
4. (Canceled)
5. (Canceled)
6. (Original) The method of claim 1, wherein the local administration of the botulinum toxin is to a facial muscle of the patient.

7. (Original) The method of claim 1, wherein the local administration is to a forehead of the patient.
8. (Original) The method of claim 1, wherein the local administration of the botulinum toxin is to a subdermal location or to a muscle location from which the patient perceives a pain to arise.
9. (Currently amended) A method for treating an acute pain medication overuse disorder, the method comprising a step of local administration by intramuscular or subcutaneous administration to [[a]] locations on or within a head of a patient of between about 105 units and about 260 units of a pure botulinum toxin type A, wherein the pure botulinum toxin has a molecular weight of about 150 kDa, to a patient who is overusing acute pain medication, wherein the patient takes the medication prior to experiencing pain and experiences pain after the intake of acute pain medication, thereby alleviating an acute pain medication overuse disorder.
10. (Previously Presented) The method of claim 1, wherein the acute pain medication overuse disorder is medication overuse headache, and the administration of the botulinum toxin is effective in reducing the number of headaches experienced by the patient.
11. (Previously Presented) The method of claim 1, wherein the administration of the botulinum toxin is effective in reducing the use of the acute pain medication.
12. (Previously Presented) The method of claim 11, wherein the acute pain medication comprises a medication selected from the group consisting of narcotic medications and triptan medications.

13. (Previously Presented) The method of claim 9, wherein the acute pain medication overuse disorder is medication overuse headache, and the administration of the botulinum toxin type A is effective in reducing the number of headaches experienced by the patient.

14. (Previously Presented) The method of claim 9, wherein the administration of the botulinum toxin type A is effective in reducing the use of the acute pain medication.

15. (Previously Presented) The method of claim 14, wherein the acute pain medication comprises a medication selected from the group consisting of narcotic medications and triptan medications.

16. (Currently amended) A method for treating an acute pain medication disorder caused by overuse of acute pain medication, the method comprising a step of local intradermal administration by intramuscular or subcutaneous administration to [[a]] locations on or within a head of a patient of between about 105 units and about 260 units of a pure botulinum type A or type B toxin, wherein the pure botulinum toxin has a molecular weight of about 150 kDa, to a patient who is overusing acute pain medication and is diagnosed with a medication overuse headache, wherein the patient takes the medication prior to experiencing pain and experiences pain after the intake of acute pain medication and wherein the administration of the botulinum toxin is effective in reducing the number of headaches experienced by the patient and in reducing the use of the acute pain medication.

17. (Canceled)

18. (Previously presented) The method of claim 16, wherein the administration comprises administering a botulinum toxin type A.

19. (Previously Presented) The method of claim 16, wherein the administration of the botulinum toxin is effective in reducing the use of a medication selected from the group consisting of narcotic medications and triptan medications.

20. (Previously Presented) The method of claim 16, wherein the effects of administering the botulinum toxin are observed within about 30 days after administration of the botulinum toxin.

21-28. (Canceled)

29. (Previously Presented) The method of claim 16, wherein the patient experiences a headache frequency greater than 15 days per month after the intake of analgesics or ergots more than 15 times per month for at least 3 months.